

# Cargilfield School School Care Accommodation Service

45 Gamekeeper's Road Edinburgh EH4 6HU

Telephone: 01313 362 207

**Type of inspection:** Unannounced

**Completed on:** 8 November 2022

Service provided by: Cargilfield School

**Service no:** CS2006117936 Service provider number: SP2003003571



## About the service

Cargilfield School is a co-educational Prep School, situated in the Western suburbs of Edinburgh. The service is registered to provide a school care accommodation service to a maximum of 60 pupils at any one time.

The boarding accommodation is split into a girls wing and a boys wing. Boarders are accommodated in rooms which accommodate between four and eight children. Each child has their own bedspace and storage space and a wall space where they can display photographs and pictures. Each wing has bathroom and kitchen facilities and communal areas where children can relax.

## About the inspection

This was an unannounced inspection which took place on 20 September between the hours of 10:30 and 19:45 and on 5 October between the hours of 09:30 and 14:30. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection, we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service, we:

- spoke with 33 young people;
- spoke with eight staff and managers;
- spoke with the nurse;
- spoke with member of the board of governors;
- received eight parent responses by email;
- observed practice, the environment and daily life; and
- reviewed documents.

## Key messages

Staff were very good at developing nurturing relationships with the children.

Children enjoyed a wide range of fun and exciting activities both in school and in boarding.

The boarding staff communicate very well with parents.

The school had recognised the need to further support children's mental health and had taken steps to address this.

Improvements had been made to the environment making the boarding facilities more homely and comfortable.

The school were in the early stages of developing an electronic care planning system and should now embed its use into practice.

## From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's rights and wellbeing?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

# How well do we support children and young people's rights and wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for young people, therefore we evaluated this question as very good.

All of the children experienced secure trusting relationships and enjoyed caring interactions with the adults around them. Children felt safe, confident and comfortable whilst having fun with their friends.

Children told us that they feel safe and this was similarly reflected in the views of all parents. Importantly, staff in boarding houses were able to express insight into children's needs and preferences about how they wished to be supported. We acknowledged the important contribution of all staff, including medical, axillary sand grounds staff when responding and reacting to children's needs.

An ethos of kindness and friendship was evident throughout the school and was seen in the role modelling of adults and in the behaviours of children in boarding.

Opportunities to meet and discuss pupil welfare through pastoral meetings were very supportive. They identified where pupils, including boarders, required additional support. The school had invested in a wellbeing management system (isams). Whilst this was in the early stages of development it was significant progress since last inspection. Already the system identified some strategies to help children progress and allocated tasks to achieve this. The next steps are to embed this into practice and develop incremental care plans based on sound assessment of needs and evidence SMART targets to meet these identified needs. The care plans should be shared with children and their parents.

Children were well supported with health and medication through the school nurse and the house staff. Storage and administration of medication arrangements were effective. However, we would suggest that audits of medication take place at least once a month in line with best practice. See area for improvement 1.

The school had recognised the need to further support children's mental wellbeing. They had developed a collaborative approach to supporting mental health and recognition of trauma on behaviours. An independent practitioner had been secured to offer individual counselling to children and consultation for staff. In addition, the school were in discussion regarding additional mental health training for staff.

Children enjoyed healthy meals provided in the school dining room. All of the children said there was something on offer that they liked. Snacks and suppers were also available in the boarding facility if they were hungry.

Children were kept safe through child protection systems which were followed in line with the child protection policy, including effective recording processes. Staff we spoke with demonstrated sound understanding of safeguarding children and knew what to do if they had any concerns.

Children experienced a warm welcoming environment within the well-maintained boarding facilities. Improvements to the environment such as new showers, decoration and rearrangement of rooms made the environment more homely and comfortable. The well maintained and extensive grounds of the school were well used by children in the evenings and at weekends. During the inspection a child said that their bed was a bit uncomfortable and the headmaster resolved to discussing this with the bursar to ensure mattresses were replaced regularly. Children presented their views through daily discussion and representation such as the boarding committee and the food committee. Children told us they were asked for their views, however they often didn't know what happened to their requests and what the next steps were. The school needs to establish how to ensure that children receive feedback to their views and requests with a 'you asked, we did' philosophy.

Parents reflected that that communication with the school was very good. They had a number of contacts and said all staff were approachable and they always got a reply. Changes to the management of the boarding houses had had a very positive impact on the children and this was commented on by children and their parents. Parents particularly liked the proactive communicating from the house staff especially for first time boarders and when their child had achieved or had an issue. This was echoed in statements such as;

"My child has repeatedly commented on the warm atmosphere the (new house parents) have created. They are incredibly welcoming and don't mind if someone knocks on their door. Even if they are busy, the child is warmly, welcomed in"

And

"Boarding feels like home from home for our child and there is a real sense of family and belonging. They have learnt to live away from home in a fun, caring environment"

Another area commented upon by both children and parents was the breadth of activities on offer to the children within the school and boarding. Statements such as;

"The best part of boarding is that she can tailor the experience to suit herself. As there are so many activities on offer."

The school were very responsive to a suggestion made by a parent to set up a parents Facebook page to post regular updates on children's activities.

#### Areas for improvement

1. 1. In order to ensure the health and wellbeing of children, medication audits should be carried out monthly.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance systems". (HSCS 4.19)

What the service has done to meet any areas for improvement we made at or since the last inspection

## Areas for improvement

#### Previous area for improvement 1

The school should embed the GIRFEC model and ensure that all staff are fully aware of the expectations in relation to GIRFEC. The service had identified that they will have an increased focus on mental wellbeing in the coming year

This area for improvement was made on 27 May 2016.

#### Action taken since then

The school had invested in a wellbeing management system (isams). This is based on the GIRFEC (Getting It Right For Every Child) model and the SHANARRI (Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included) indicators. They had also secured the services of an external Mental Health practitioner.

#### Previous area for improvement 2

Some of the children identified in the Care Standard Questionnaire and the Survey Monkey that they would like more privacy. During the inspection we found that this was in relation to the girl's shower room. The school were already aware of this and were taking action to address the issue. Inspection report Inspection report for Cargilfield School page 16 of 24 The school should explore how they could offer more privacy for children, particularly senior pupils.

#### This area for improvement was made on 27 May 2016.

#### Action taken since then

The school had made improvements to the environment such as new showers, which improved privacy.

### Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

## Detailed evaluations

How well do we support children and young people's rights and wellbeing?	5 - Very Good
7.1 Children and young people are safe, feel loved and get the most out of life	5 - Very Good

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